



DEPARTMENT OF THE AIR FORCE
59TH MEDICAL WING (AETC)
JOINT BASE SAN ANTONIO - LACKLAND TEXAS



20 APR 2017

MEMORANDUM FOR SGOM

ATTN: CAPT JEAN STOREY

FROM: 59 MDW/SGVU

SUBJECT: Professional Presentation Approval

1. Your paper, entitled **Six Years Experience with Porcine Extracellular Matrix: A New Paradigm for Pelvic Floor Repair** presented at/published to **ACOG Annual Clinical Meeting, La Jolla, CA, 6-9 May 2017** in accordance with MDWI 41-108, has been approved and assigned local file #**17171**.
2. Pertinent biographic information (name of author(s), title, etc.) has been entered into our computer file. Please advise us (by phone or mail) that your presentation was given. At that time, we will need the date (month, day and year) along with the location of your presentation. It is important to update this information so that we can provide quality support for you, your department, and the Medical Center commander. This information is used to document the scholarly activities of our professional staff and students, which is an essential component of Wilford Hall Ambulatory Surgical Center (WHASC) internship and residency programs.
3. Please know that if you are a Graduate Health Sciences Education student and your department has told you they cannot fund your publication, the 59th Clinical Research Division may pay for your basic journal publishing charges (to include costs for tables and black and white photos). We cannot pay for reprints. If you are a 59 MDW staff member, we can forward your request for funds to the designated Wing POC at the Chief Scientist's Office, Ms. Alice Houy, office phone: 210-292-8029; email address: alice.houy.civ@mail.mil.
4. Congratulations, and thank you for your efforts and time. Your contributions are vital to the medical mission. We look forward to assisting you in your future publication/presentation efforts.

Linda Steel-Goodwin

LINDA STEEL-GOODWIN, Col, USAF, BSC
Director, Clinical Investigations & Research Support

PROCESSING OF PROFESSIONAL MEDICAL RESEARCH/TECHNICAL PUBLICATIONS/PRESENTATIONS

INSTRUCTIONS

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 - b. In Section 2, there may be funding available for journal costs, if your department is not paying for figures, tables or photographs for your publication. Please state "YES" or "NO" in Section 2 of the form, if you need publication funding support.
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3. Attach a copy of the 59 MDW IRB or IACUC approval letter for the research related study. If this is a technical publication/presentation, state the type (e.g. case report, QA/QI study, program evaluation study, informational report/briefing, etc.) in the "Protocol Title" box.
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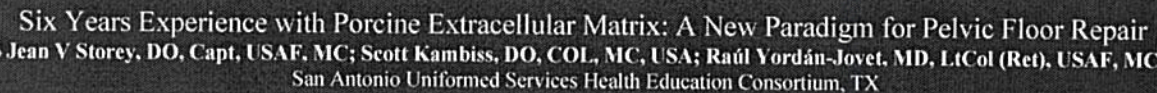
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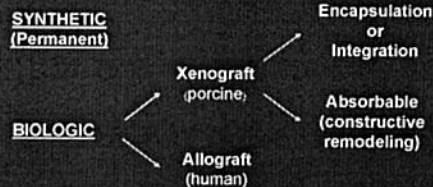
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BACKGROUND

- Pelvic organ prolapse (POP) can be associated with sexual, defecatory, and urinary dysfunction
- 3rd most common reason for hysterectomy and an 11% lifetime-risk of surgery for POP
- 30% re-operation after initial surgery
- Native tissue augmentation includes synthetic mesh or biologic-derived graft which can increase durability and longevity of repair
- Significant complications including dyspareunia, contractions, erosions and fistulas appear material-dependent

Tissue Augmentation Options



Porcine Extracellular Matrix



Figure 1 - Packaged



Figure 2 - At Placement

Methods

- Case Series
 - 84 patients with Porcine Extracellular Matrix
 - Variety of level 1 and 2 defects
- Outcome
 - Support (POP-Q @ 3 mos)
 - Durability of repair (POP-Q yearly)
 - Intra / Postoperative complications
- Charts at our institution between 2010-2015 were reviewed
- Preoperative POP-Q scores measuring level 1 and level 2 support ranged from -2 to +6 at most presenting part
- Total of 509 pelvic reconstruction procedures performed:
 - 61 anterior repairs
 - Includes 17 TVHs with uterosacral ligament suspension and 6 concurrent posterior repairs
 - 27 additional posterior repairs
 - 2 vaginal paravaginal repairs
 - 3 bilateral sacrospinous colpopexies

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Results

- POP-Q scores obtained from 3-72 months (median = 54) postoperatively
- Durable global level 1 and 2 support with most patient at -3 scores at presenting part
- No significant surgical or product complications were identified
- Postoperative
 - 2 anatomical failures to anterior or apical scores of -1 at most presenting part
 - Only 1 symptomatic case needed reoperation (enterocele)

CONCLUSION

- Porcine Extracellular Matrix
 - Is technically easy to use
 - Provides durable POP repair
 - No complications associated with matrix
 - No host-graft rejection
- Limitations
 - Observational case series
 - No controls or randomization
- Future Directions
 - Prospective trial comparing autologous and absorbable xenograft repairs
 - QoL evaluation
 - Cost effectiveness evaluation

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